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Bib Data Sheet

CONFIRMATION NO. 8292

SERIAL NUMBER 10/784,594	FILING OR 371(c) DATE 02/23/2004 RULE	CLASS 701	GROUP ART UNIT 3661	ATTORNEY DOCKET NO. GEN10 P-433A
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APPLICANTS

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**** CONTINUING DATA *******

This application is a CIP of 10/210,910 08/02/2002 PAT 6,968,273 which claims benefit of 60/360,723 03/01/2002
 This application 10/784,594
 claims benefit of 60/449,828 02/24/2003

**** FOREIGN APPLICATIONS *******

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY MI	SHEETS DRAWING 43	TOTAL CLAIMS 106	INDEPENDENT CLAIMS 17
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ADDRESS

028469

TITLE

Electronic compass system

FILING FEE RECEIVED 3522	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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